

<b>CLAIMS ONLY</b>								Application Number <b>10017202</b> Applicant(s)		Filing Date <b>6-28-4</b>
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
1										
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15			/	/						
16			/	/						
17			X	X						
18			X	X						
19			X	X						
20			X	X						
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49										
50										
Total Indep			1							
Total Depend			8							
Total Claims			(9)							